UNI Suzuki School  Fall Enrollment INTENT-TO-REGISTER

IMPORTANT:  **REPLY REQUESTED before May 20.**

To let us know your plans for the coming school year and to anticipate our staff needs for **fall**, please fill out this form and return to us no later than May 20. This form does not take the place of the registration process. You will still need to fill out the online scheduling form during the summer, submit them by August 10 and attend registration in late August. If you are interested in summer lessons, please contact your individual lesson teacher. If you are not interested in fall enrollment, please check appropriate box and return form.

Give to:  Cathy at group lessons or rehearsal.  
E-Mail fall info to this email address:  
_____________________________  

or mail to:  
School of Music  
Cedar Falls, IA 50614-0246

***Include your General Activity Fee (also known as intent deposit) with this form.  
$20 per family for one student or $25 per family for more than one student  
This deposit is non-refundable. Adult students do not need to pay this fee.  
Make check payable to **UNI Suzuki Association**.  

***Do not include fee or rent payments in this deposit amount.  

☐ No, we are not interested in fall enrollment for _______________________________

☐ YES! Our family in interested in lessons this fall  
Please include the following students and/or adult students on the fall enrollment list:

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Requested Lesson Length minutes</th>
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<tr>
<td>___________________________</td>
<td>30 45 60 same as current year or change?</td>
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</tbody>
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We can NOT guarantee fall placement for students who have not returned this form by the May 20th deadline. Thank you for your prompt reply.

**ADDITIONAL CONTRIBUTION**: The UNI Suzuki Association will be asked for more financial support for the school’s programs including scholarship assistance. If you are able to contribute to this fund by adding an additional amount to your intent fee, it would be most appreciated. A donation of as little as $5 per family would significantly add to this fund. Thank you in advance for your support.

Do you know have another child who would like to start lessons? Please include info even if you have previously expressed interest in having a sibling join.  
Name of child __________________________ Birthdate __________________\
  Indicate this summer start _____ this fall start_____  

Do you have family friends or neighbors who have indicated an interest in our school? If you give us contact info we will send Suzuki School Information to them.  
Name ____________________________  
Address ____________________________________________  
City, Zip ____________________________